



Glenn Grieb
Plant Manager
VEOLIA WATER NORTH AMERICA

KinBuc Landfill Treatment Plant
383 Meadow Road
Edison, NJ 08817
www.veoliawatema.com

April 15, 2005

Ms. Grissel V. Diaz-Cotto
Emergency and Remedial Response Division
United States Environmental Protection Agency
Region II
290 Broadway, 19th Floor
New York, NY 10007-1866

Re: March 2005 Discharge Monitoring Report
Leachate Treatment Plant, Operable Unit 1
Kin-Buc Landfill Superfund Site

Dear Ms. Diaz-Cotto:

The March 2005 Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit 1, Kin-Buc Landfill Superfund Site.

Should you have any questions concerning the DMR or other site items, please contact me at your earliest convenience at the Kin-Buc site.

Very truly yours,
Veolia Water
On behalf of SCA Services, Inc.,

Glenn Grieb
Plant Manager

Enclosure

cc: Martha Goodwin – NJDEP
Stephen Joyce – SCA Holding
Carl Januszkiewicz – Waste Management
Richard Hoyt – Veolia Water



562167



NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO.
*
*NJ Permit Equivalent

REPORTING PERIOD
M o. Y r. M o. Y r.

PERMITTEE: Name: SCA Services, Inc.
 Address: 383 Meadow Road
 Edison, New Jersey 08817

FACILITY: Name: Kin-Buc Landfill
 Address: 383 Meadow Road
 Edison, New Jersey 08817
 Telephone: 732-572-4743

FORMS ATTACHED (Indicate Quantity of Each)

Operating Exceptions

SLUDGE REPORT-SANITARY
__ T-VWX-007 __ T-VWX-008 __ T-VWX-009
__ EPA Form 3320-1

YES NO
DYE TESTING __ X

SLUDGE REPORT-INDUSTRIAL
__ T-VWX-010A __ T-VWX-010B

TEMPORARY BYPASSING __ X

WASTEWATER REPORTS
__ T-VWX-011 __ T-VWX-012 __ T-VWX-013

DISINFECTION INTERRUPTION __ X

GROUNDWATER REPORTS
__ T-VWX-015(A,B) __ T-VWX-016 __ T-VWX-017
__ ELECTRONIC SUBMISSION

MONITORING MALFUNCTIONS __ X

UNITS OF OPERATION __ X

OTHER __ X

NPDES DISCHARGE MONITORING
1 EPA Form 3320-1

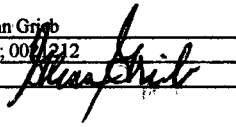
(Detail any "Yes" on reverse side in appropriate space.)

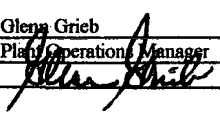
NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

AUTHENTICATION I certify under penalty of law that this document and all attachments were prepared under the direction or supervision in accordance with a system designed to assure my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

LICENSED OPERATOR

PRINCIPAL EXECUTIVE OFFICER OR
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) Glenn Grieb
Grade & Registry No. N-4 ; 000212
Signature 

Name (Printed) Glenn Grieb
Title (Printed) Plant Operations Manager
Signature 

Date April 14th, 2005

[illegible]

HOURS ATTENDED AT PLANT MONTH **03** YEAR **05**

Day of Month

Licensed Operator

Others

Day of Month

Licensed Operator

Others

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
8	8	8	8	0	0	9	11	11	9	8	8	2	8	8	8
8	10	8	8	8	0	8	8	8	8	8	16	4	0	8	8
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
8	8	8	8	8	8	8	8	8	0	0	0	10	11	12	
8	8	4	4	8	8	8	8	8	4	0	8	8	8	8	

PERMITTEE NAME/ADDRESS

NAME

ADDRESS

FACILITY

LOCATION

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT

PERMIT NUMBER

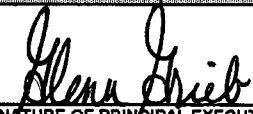
001

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY
05	03	01

YEAR	MO	DAY
05	03	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW	SAMPLE MEASUREMENT	0.024184	0.029524	MGD	*****	*****	*****	***	***	continuous	flow meter
	PERMIT REQUIREMENT	REPORT	ONLY		*****	*****	*****			continuous	flow meter
pH	SAMPLE MEASUREMENT	*****	*****	***	6.79	*****	7.60	S.U.	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		6.0	*****	9.0			weekly	grab
PETROLEUM HYDROCARBONS	SAMPLE MEASUREMENT	*****	*****	***	*****	<1.000	<1.000	mg/l	0	2/month	grab
	PERMIT REQUIREMENT	*****	*****		*****	10	15			2/month	grab
COD	SAMPLE MEASUREMENT	16.90	17.46	kg/day	*****	165	168	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT	ONLY			2/month	comp.
BOD	SAMPLE MEASUREMENT	*****	*****	***	*****	<5.00	<5.00	mg/l	0	2/month	comp.
	PERMIT REQUIREMENT	*****	*****		*****	56	220			2/month	comp.
TOTAL SUSPENDED SOLIDS	SAMPLE MEASUREMENT	0.25	0.41	kg/day	*****	2.93	4.05	mg/l	0	1/week	comp.
	PERMIT REQUIREMENT	REPORT	ONLY		*****	30	45(1)			weekly	comp.
DISSOLVED OXYGEN	SAMPLE MEASUREMENT	*****	*****	***	10.84	*****	*****	mg/l	0	1/week	grab
	PERMIT REQUIREMENT	*****	*****		4.0 MIN. Instantaneous	*****	*****			weekly	grab
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE		
Glenn Grieb Project Manager							 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		732 572-4743		05 04 14
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR MO DAY		

COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS

(REFERENCE ALL ATTACHMENTS HERE)

PERMITTEE NAME/ADDRESS

NAME
ADDRESS

SCA SERVICES, INC.
383 MEADOW ROAD
EDISON, NEW JERSEY 08817

FACILITY
LOCATION
ATTN:

KIN-BUC LANDFILL
EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
PERMIT NUMBER

001
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MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
05	03	01	05	03	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
BENZENE	SAMPLE MEASUREMENT	0.0000308	0.0000312	kg/day	*****	0.30	0.30	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.008	0.02		*****	57	134			2/month	grab		
CHLOROBENZENE	SAMPLE MEASUREMENT	<0.0000308	<0.0000312	kg/day	*****	0.3	0.3	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab		
1,1 DICHLOROETHENE	SAMPLE MEASUREMENT	<0.0000411	<0.0000416	kg/day	*****	0.4	0.4	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.003	0.009		*****	22	59			2/month	grab		
ETHYLBENZENE	SAMPLE MEASUREMENT	<0.0000308	<0.0000312	kg/day	*****	0.3	0.3	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.022	0.058		*****	142	380			2/month	grab		
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000411	<0.0000416	kg/day	*****	0.40	0.40	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.008	0.025		*****	52	164			2/month	grab		
TOLUENE	SAMPLE MEASUREMENT	<0.0000308	<0.0000312	kg/day	*****	0.30	0.30	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.004	0.011		*****	28	74			2/month	grab		
1,2-TRANSDICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000308	<0.0000312	kg/day	*****	0.30	0.30	ug/L	0	2/month	grab		
	PERMIT REQUIREMENT	0.004	0.009		*****	25	60			2/month	grab		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years)					TELEPHONE		DATE				
Glenn Grieb Project Manager							732 1572-4743		05 04 14				
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE		NUMBER				
COMMENTS AND EXPLANATIONS OF ANY VIOLATIONS (REFERENCE ALL ATTACHMENTS HERE)									YEAR MO DAY				

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EDISON, NEW JERSEY 08817

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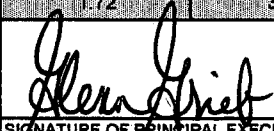
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
PERMIT NUMBER

001
DISCHARGE NUMBER

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
05 03 01 TO 05 03 31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TRICHLOROETHYLENE	SAMPLE MEASUREMENT	<0.0000411	<0.0000416	kg/day	*****	0.40	0.40	ug/L	0	2/month	grab
	PERMIT REQUIREMENT	0.004	0.010		*****	26	69			2/month	grab
VINYL CHLORIDE	SAMPLE MEASUREMENT	<0.0000411	<0.0000443	kg/day	*****	0.4	0.4	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	0.008	0.016		*****	52.8	106			weekly	grab
ACENAPHTHYLENE	SAMPLE MEASUREMENT	<0.0000077	<0.0000078	kg/day	*****	0.1	0.1	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)ANTHRACENE	SAMPLE MEASUREMENT	<0.0000099	<0.0000100	kg/day	*****	0	0	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(A)PYRENE	SAMPLE MEASUREMENT	<0.0000077	<0.0000078	kg/day	*****	0.075	0.077	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(ghi)PERYLENE	SAMPLE MEASUREMENT	<0.0000077	<0.0000078	kg/day	*****	0.1	0.1	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
BENZO(k)FLUORANTHENE	SAMPLE MEASUREMENT	<0.0000031	<0.0000063	kg/day	*****	0.06	0.06	ug/L	0	1/month	grab
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab
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<0.00017

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
 DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT

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MONITORING PERIOD

YEAR	MO	DAY
05	03	01

TO

YEAR	MO	DAY
05	03	31

PARAMETER		QUANTITY OR LOA			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
IDENO(1,2,3cd) PYRENE	SAMPLE MEASUREMENT	<0.0000099	<0.0000100	kg/day	*****	0.097	0.099	ug/L	0	1/month	grab	
	PERMIT REQUIREMENT	0.00026	0.00052		*****	1.72	3.43			monthly	grab	
PHENANTHRENE	SAMPLE MEASUREMENT	<0.0000103	<0.0000111	kg/day	*****	<0.10	<0.10	ug/L	0	1/week	grab	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	5.4(2)			weekly	grab	
ALDRIN	SAMPLE MEASUREMENT	<0.0000010	<0.0000010	kg/day	*****	<0.01	<0.01	ug/L	0	1/month	grab	
	PERMIT REQUIREMENT	0.000133	0.00026		*****	0.0875	0.176			monthly	grab	
4,4-DDT	SAMPLE MEASUREMENT	<0.0000010	<0.0000010	kg/day	*****	<0.01	<0.01	ug/L	0	1/week	grab	
	PERMIT REQUIREMENT	0.0000578	0.000146		*****	0.38	0.765			weekly	grab	
PCB-1242	SAMPLE MEASUREMENT	<0.0000206	<0.0000221	kg/day	*****	<0.20	<0.20	ug/L	0	1/week	grab	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab	
PCB-1248	SAMPLE MEASUREMENT	<0.0000308	<0.0000332	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab	
PCB-1254	SAMPLE MEASUREMENT	<0.0000206	<0.0000221	kg/day	*****	<0.20	<0.20	ug/L	0	1/week	grab	
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and I am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)						TELEPHONE		DATE		
Glenn Grieb Project Manager								732 572-4743		05 04 14		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						AREA CODE	NUMBER	YEAR	MO	DAY

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EDISON, NEW JERSEY
CARL JANUSZKIEWICZ

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

NJ PERMIT EQUIVALENT
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YEAR MO DAY
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TO

YEAR MO DAY
05 03 31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PCB-1260	SAMPLE MEASUREMENT	<0.0000308	<0.0000332	kg/day	*****	<0.30	<0.30	ug/L	0	1/week	grab
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	0.5(2)			weekly	grab
ARSENIC	SAMPLE MEASUREMENT	0.0004756	0.0007086	kg/day	*****	4.60	6.40	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.013	0.026		*****	85.8	172			weekly	comp
CADMIUM	SAMPLE MEASUREMENT	<0.0000582	<0.0000	kg/day	*****	0.6	0.8	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.0073	0.017		*****	48.2	112			weekly	comp
CHROMIUM	SAMPLE MEASUREMENT	0.0004652	0.0014216	kg/day	*****	4.62	14.50	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.030	0.080		*****	196	396			weekly	comp
COPPER	SAMPLE MEASUREMENT	0.0004291	0.0008193	kg/day	*****	4.1	7.4	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
LEAD	SAMPLE MEASUREMENT	0.0001336	0.0001439	kg/day	*****	1.30	1.30	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	REPORT	ONLY		*****	REPORT ONLY	10			weekly	comp
NICKEL	SAMPLE MEASUREMENT	0.0028574	0.0033547	kg/day	*****	27.8	30.3	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.140	0.281		*****	924	1850			weekly	comp
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Glenn Grieb Project Manager							732 572-4743		05 04 14		
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**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
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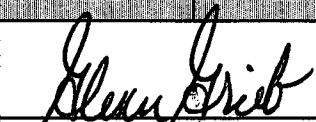
YEAR MO DAY

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TO

YEAR MO DAY

05 03 31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC	SAMPLE MEASUREMENT	0.0012546	0.0018370	kg/day	*****	16.4	21.4	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.177	0.356		*****	1170	2350			weekly	comp
CYANIDE	SAMPLE MEASUREMENT	<0.0010278	<0.0011072	kg/day	*****	<10.0	<10.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	0.002	0.004		*****	13.2	26.4			weekly	comp
ALUMINUM	SAMPLE MEASUREMENT	0.0076516	0.0138394	kg/day	*****	73.5	125.0	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	1.40	2.81		*****	9240	18500			weekly	comp
IRON	SAMPLE MEASUREMENT	0.0048677	0.0086801	kg/day	*****	46.8	78.4	ug/L	0	1/week	comp
	PERMIT REQUIREMENT	80.6	162		*****	532000	1070000			weekly	comp
ACUTE TOXICITY, (LC50)	SAMPLE MEASUREMENT	QUARTELY	REPORT	***	>100%	*****	*****	%	0		
	PERMIT REQUIREMENT	*****	*****		50(3)	*****	*****			see permit	equivalent
Ammonia	SAMPLE MEASUREMENT	*****	*****	***	*****	0.150	.200	mg/l	0	*****	*****
	PERMIT REQUIREMENT	*****	*****		*****	4.9	10.0			2/month	comp
	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	*****	***	***	*****	*****
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****			*****	*****
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 & 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years)				 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
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